

1. THIS ORDER MUST BE ACCEPTED ON A DIRECT CITATION BASIS ONLY AND IS SUBJECT TO THE CONDITIONS LISTED ON THE REVERSE SIDE.							2. DOCUMENT NUMBER			
3. REFERENCE NUMBER		4. FUNDS EXPIRE ON		5. DMS RATING		6. PRIORITY		7. DATE REQUIRED		
								8. AMENDMENT NO Basic		
9. FROM:						10. FOR DETAILS CONTACT:				
						Technical POC:				
						FINANCIAL CONTROL:				
11. TO:						12. MAIL INVOICES TO:				
UIC N68939 DEPARTMENT OF THE NAVY (CODE 02) NAVAL INFORMATION SYSTEMS MANAGEMENT CENTER ATTN: TAC NOTEBOOK CONTRACTING OFFICER WASHINGTON NAVY YARD, BLDG 176, 5TH FLOOR WASHINGTON DC 20374-5070										
13. ACCOUNTING DATA TO BE CITED ON RESULTING BILLINGS										
A. ACRN	B. APPROPRIATION	C. SUB-HEAD	D. OBJ. CLASS	E. BU. CONTROL	F. SA	G. AAA	H. TT	I. PAA	J. COST CODE	K. AMOUNT
AA	97X4930	NH3P	000	77777	0	068940	2F	000000		\$
14. AMOUNTS WILL NOT BE EXCEEDED IN THE OBLIGATION DOCUMENT WITHOUT PRIOR WRITTEN APPROVAL FROM THE ISSUER.								L. TOTAL THIS DOCUMENT		\$
								M. CUMULATIVE TOTAL		\$
15. PROCUREMENT BY CONTRACT OF THE FOLLOWING ITEMS IS REQUESTED. THESE ITEMS <input type="checkbox"/> ARE <input checked="" type="checkbox"/> ARE NOT INCLUDED IN THE INTERSERVICE SUPPLY SUPPORT PROGRAM AND REQUIRED INTERSERVICE SCREENING <input type="checkbox"/> HAS <input checked="" type="checkbox"/> HAS NOT BEEN ACCOMPLISHED.										
A. ACRN	B. ITEM NO.	C. FSC	D. DESCRIPTION (NAT. STOCK NO., SPEC. AND/OR DRAWING NO., ETC.)				E. QUANTITY	F. UNIT	G. ESTIMATED UNIT PRICE	H. ESTIMATED AMOUNT
			SOURCE APPRN: ELEMENT: SUBPROJECT: BASIC IS ISSUED TO PROVIDE FUNDS FOR TAC EQUIP- MENT LISTED ON THE ATTACHED CONFIGURATION WORKSHEET FOR ORDERING AGREEMENT . CONTRACT: N68939- GSA CONTRACT: GS-35F- JO#: STUB #: COPY TO: FAX Copy to: 619-553-6605 ATTN: TAC BPA POC: CONTRACTING OFFICER, (202) 433-7128							\$
16. SEE ATTACHED PAGES FOR DELIVERY SCHEDULES, PRESERVATION AND PACKAGING INSTRUCTIONS, SHIPPING INSTRUCTIONS AND INSTRUCTIONS FOR DISTRIBUTION OF CONTRACTS AND RELATED DOCUMENTS.									I. GRAND TOTAL	\$
17. TRANSPORTATION ALLOTMENT (Used if FOB Contractor's plant.)										
18. I CERTIFY THAT THE FUNDS CITED ARE PROPERLY CHARGEABLE FOR THE WORK ON SERVICES REQUESTED.				AUTHORIZING OFFICIAL (NAME, TITLE AND SIGNATURE)					DATE	
				HEAD, FINANCIAL CONTROL						
19. THIS ORDER IS ACCEPTED AND THE WORK OR SERVICES WILL BE PROVIDED IN ACCORDANCE HEREWITH.				ACCEPTING OFFICIAL (NAME, TITLE AND SIGNATURE)					DATE	